

# SENATE BILL 1075

J3

0lr3083

---

By: **Senator Pipkin**

Introduced and read first time: March 3, 2010

Assigned to: Rules

---

## A BILL ENTITLED

1 AN ACT concerning

2 **Health Services Cost Review Commission – Membership**

3 FOR the purpose of increasing the number of members on the Health Services Cost  
4 Review Commission; specifying that certain members of the Commission shall  
5 represent certain interests; requiring members of the Commission to devote  
6 full-time duties to office; requiring the Governor, to the extent practicable,  
7 when making appointments to the Commission, to assure geographic balance  
8 and promote certain diversity in the Commission membership; authorizing the  
9 Governor to remove a member in a certain manner under certain circumstances;  
10 clarifying that user fees for the Commission shall be used to pay the salaries of  
11 Commission members; establishing the terms of certain Commission members;  
12 providing for a delayed effective date; and generally relating to the membership  
13 of the Health Services Cost Review Commission.

14 BY repealing and reenacting, without amendments,  
15 Article – Health – General  
16 Section 19–201(a) and (b) and 19–213(a) and (b)  
17 Annotated Code of Maryland  
18 (2009 Replacement Volume)

19 BY repealing and reenacting, with amendments,  
20 Article – Health – General  
21 Section 19–203 and 19–213(c)  
22 Annotated Code of Maryland  
23 (2009 Replacement Volume)

24 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF  
25 MARYLAND, That the Laws of Maryland read as follows:

26 **Article – Health – General**

---

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



1 19–201.

2 (a) In this subtitle the following words have the meanings indicated.

3 (b) “Commission” means the State Health Services Cost Review Commission.

4 19–203.

5 (a) (1) The Commission consists of [7] 9 members appointed by the  
6 Governor.

7 (2) [Of the 7 members, 4 shall be individuals who do not have any  
8 connection with the management or policy of any facility] **OF THE 9 MEMBERS:**

9 (I) **AT LEAST 3 SHALL REPRESENT THE INTERESTS OF**  
10 **HOSPITALS IN THE STATE; AND**

11 (II) **AT LEAST 3 SHALL REPRESENT THE INTERESTS OF**  
12 **PAYORS, AS DEFINED IN § 19–132 OF THIS TITLE.**

13 (b) Each member shall be interested in problems of health care.

14 (c) **EACH MEMBER SHALL DEVOTE FULL TIME TO THE DUTIES OF**  
15 **OFFICE.**

16 [(c)] (D) (1) The term of a member is 4 years.

17 (2) The terms of members are staggered as required by the terms  
18 provided for members of the Commission on July 1, [1982] 2012. [The terms of those  
19 members end as follows:

20 (i) 2 in 1983;

21 (ii) 1 in 1984;

22 (iii) 2 in 1985; and

23 (iv) 2 in 1986.]

24 (3) At the end of a term, a member continues to serve until a successor  
25 is appointed and qualifies.

26 (4) A member who is appointed after a term has begun serves only for  
27 the rest of the term and until a successor is appointed and qualifies.

1 (5) A member who serves 2 consecutive full 4-year terms may not be  
2 reappointed for 4 years after completion of those terms.

3 (6) [When appointing a member to fill a vacancy due to the expiration  
4 of a member's term, the Governor shall give consideration to, and make appointments  
5 when appropriate, that would promote the racial, gender, and geographic diversity of  
6 the Commission] **WHEN APPOINTING MEMBERS TO THE COMMISSION, THE  
7 GOVERNOR SHALL, TO THE EXTENT PRACTICABLE, ASSURE GEOGRAPHIC  
8 BALANCE AND PROMOTE RACIAL, ETHNIC, AND GENDER DIVERSITY IN THE  
9 COMMISSION MEMBERSHIP.**

10 **(E) THE GOVERNOR MAY REMOVE A MEMBER FOR INCOMPETENCE OR  
11 MISCONDUCT IN ACCORDANCE WITH § 3-307 OF THE STATE GOVERNMENT  
12 ARTICLE.**

13 19-213.

14 (a) (1) In this section the following words have the meanings indicated.

15 (2) "Facilities" means hospitals and related institutions whose rates  
16 have been approved by the Commission.

17 (b) The Commission shall assess and collect user fees on facilities as defined  
18 in this section.

19 (c) (1) The total fees assessed by the Commission may not exceed  
20 \$5,500,000.

21 (2) The total user fees assessed by the Commission may not exceed the  
22 Special Fund appropriation for the Commission by more than 20%.

23 (3) **(I)** The user fees assessed by the Commission shall be used  
24 exclusively to cover the actual documented direct costs of fulfilling the statutory and  
25 regulatory duties of the Commission in accordance with the provisions of this subtitle  
26 and any administrative costs for services to the Commission provided by the  
27 Department.

28 **(II) THE USER FEES ASSESSED BY THE COMMISSION SHALL  
29 BE USED TO PAY THE SALARIES OF THE MEMBERS OF THE COMMISSION IN  
30 ACCORDANCE WITH THE STATE BUDGET.**

31 (4) The Commission shall pay all funds collected from fees assessed in  
32 accordance with this section into the Health Services Cost Review Commission Fund.

33 (5) The user fees assessed by the Commission may be expended only  
34 for purposes authorized by the provisions of this subtitle.

1           (6)    The amount specified in paragraph (1) of this subsection limits  
2 only the total user fees the Commission may assess in a fiscal year.

3           SECTION 2. AND BE IT FURTHER ENACTED, That the terms of the  
4 members of the Health Services Cost Review Commission serving on July 1, 2012,  
5 shall expire as follows:

6           (1)    three members in 2013;

7           (2)    three members in 2014; and

8           (3)    three members in 2015.

9           SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect  
10 July 1, 2011.